

JAN 13 2004 5:31PM 858 792-6773 FOLEY AND LARDNER

NO. 7284 P. 1

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FACSIMILE TRANSMISSION

Total # of Pages: 9 (including this page)

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Examiner S. Gollamudi - Art Unit 1616 Commissioner for Patents Mail Stop RCE	(703) 306-5439	(703) 872-9306

From : Stephen E. Reiter *SE*
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Date : January 13, 2004
Client/Matter No : 071243-1317
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MESSAGE:

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Re: Application Serial No. 09/847,945

Following are:

Request for Continued Examination (RCE) (4 pgs.-in dupl.. = 8 pgs.).

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Atty. Dkt. No. ABI1460-3
(071243-1317)**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

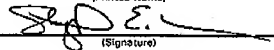
Applicant: Desai et al.
Title: COMPOSITIONS AND
METHODS FOR
TREATMENT OF
HYPERPLASIA

Appl. No.: 09/847,945

Appl. Filing Date: 05/02/2001

Examiner: S. Gollamudi

Art Unit: 1616

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Stephen E. Reiter (Printed Name)  (Signature) January 13, 2004 (Date of Deposit)

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OFFICIAL**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

☒ [X] Please enter and consider the amendment/reply previously filed on 11/18/2003.

Atty. Dkt. No. ABI1460-3
(071243-1317)

- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ___ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ___.
- ☐ Other ___.
- b. Enclosed are:
- ☐ Amendment/Reply.
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of ___ listed reference(s).
- ☐ Other .

Miscellaneous:

- ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ___ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$770.00	= \$770.00
Total Claims:	30	- 30	= 0	x \$18.00	= \$0.00
Independents	7	- 7	= 0	x \$86.00	= \$0.00
First presentation of any Multiple Dependent Claims:			+	\$290.00	= \$0.00
CLAIMS FEE TOTAL:					= \$770.00

Atty. Dkt. No. ABI1460-3
(071243-1317)

- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the
total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$110.00	0	\$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$420.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$950.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,480.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,010.00		\$0.00
	EXTENSION FEE SUBTOTAL:			\$0.00
	EXTENSION FEE ALREADY PAID:	-		\$0.00
	EXTENSION FEE TOTAL			\$0.00
	CLAIMS AND EXTENSION FEE TOTAL:			\$770.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):			\$0.00
<input type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
	TOTAL FEE:			\$770.00

- ☒ Please charge Deposit Account No. 50-0872 in the amount of \$770.00. A duplicate copy of this transmittal is enclosed.

- ☐ A check in the amount of \$770.00 _____ to cover the filing fee is enclosed.

- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

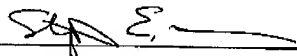
Atty. Dkt. No. ABII460-3
(071243-1317)

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: January 13, 2004

By



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Stephen E. Reiter
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